UTILITY PATENT APPLICATION TRANSMITTAL

nly for new nonprovisional applications under 37 CFR 1.53(b))

P01,0374 Attorney Docket

First Named Inventor or Application Identifier

10-05-01

Kjell Noren et al,

Express Mail Label No: # FI 843729235US

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Assistant Commissioner for Patents **Box Patent Application** Washington, DC 20231

ACCOMPANYING APPLICATION PARTS

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ACCOMPANYING APPLICATION PARTS		
. <u>X</u> 2. <u>X</u> 3. <u>X</u>	Specification Drawing(s) (35USC 113) Declaration and Power of Attorney	[Total Pages _ 15] [Total Pages _ 7 _] [Total Pages _ 2 _]	5. <u>X</u>	Assignment Papers (cover sheet & documentation) St. Jude Medical AB (Faxed copy of original) Letter under 37 CFR 1.41(c).	

Newly executed (Faxed copy of original) a. X

Copy from prior application (37CFR 1.63(d)) (for continuation/divisional with Box 14 completed)

> [Note Box 4 Below] DELETION OF INVENTOR(S) Signed statement attached deleting Inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

Incorporation By Reference (usable if Box 3b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 3b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

English Translation Document (if applicable)

Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations Preliminary Amendment 10. X Return Receipt Postcard (MPEP 503)

(Should be specifically itemized) 11. ___ Small Entity Status (37 CFR 1.27)

12. X Certified Copy of Priority Document(s) Swedish Application No. 0004224-2 filed November 16, 2000 Other

If a CONTINUIN	G APPLICATION	I, check appropriate box and supp	oly the requisite information:
Continuation	Divisional	Continuation-in-part (CIP)	of prior application No:_

ijed:	CLAIMS AS FILED				
i,	(1) - FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) BASIC FEE \$740.00
4	TuTAL CLAIMS 20	8			
÷	INDEPENDENT CLAIMS 3	1			
2.		ANY MULTIPLE DEPENDENT CLAIMS? ()YES (X) NO			
				TOTAL FILING FEE ->	\$740.00

The Commissioner is hereby authorized to charge any additional fees which may be required in connection with this application, or credit any overpayment to ACCOUNT NO. 501-519. A duplicate copy of this sheet is enclosed.

A check in the amount of \$740.00 to cover the filing fee is enclosed.

15. (CORRESPONDENCE ADDRESS
	SCHIFF HARDIN & WAITE

SIGNATURE JS/SN:BC

Patent Department 6600 Sears Tower - 233 South Wacker Drive Chicago, Illinois 60606

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terent. Noll#28,982

CUSTOMER NUMBER: 26574

DATE:	November 15, 2	001
		11.41

"Express Mail" Mailing Label Number EL 843729235 US Date of Deposit: November 15, 2001

I hereby certify that the following is being deposited with the United States Postal "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to The Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Proposed Patent Application for KJELL NOREN, CHARLOTTE KNELLMAN, KENTH NILSSON, and SVEN-ERIK HEDBERG entitled "IMPLANTABLE MEDICAL DEVICE FOR MEASURING VENTRICULAR PRESSURE" consisting of specification, claims, 7 Sheets of drawings, Certified Copy of Swedish Application 0004224-2 Attorney Docket No. P01,0374

Signature of person mailing application

Name of person mailing application